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04-27-04

PETITION TO MAKE APPLICATION SPECIAL

April 26, 2004

Honorable Commissioner of Patents and Trademarks
Washington, DC 20231

In re:

Application S/N **10/820,901**
Title: **ANTI-ABDUCTION SYSTEM AND METHOD**
Inventor: **Vernice Doyle Taliaferro**
Filing Date: **4/8/2004**

Dear Sir:

Applicant hereby petitions the Commissioner pursuant to 37 CFR § 1.102(c) (MPEP § 708.02) to MAKE SPECIAL THE ABOVE CAPTIONED APPLICATION because

- (a) the Applicant Vernice Doyle Taliaferro (DOB 3/9/1927) is currently 77 years old, and therefore pursuant to MPEP § 708.02(IV) the Applicant is entitled to advancement of this application due to the fact that the Applicant is over 65 years of age. Applicant submits the enclosed copy of his birth certificate to support this petition.
- (b) the Applicant Vernice Doyle Taliaferro (DOB 3/9/1927) is currently in ill health, having recently been hospitalized on 4/5-4/8/2004 with bronchitis. Applicant has a history of recurring pneumonia infections that generally require hospitalization due to his advanced age. Given the Applicant's advanced age and ill health, pursuant to MPEP § 708.02(III) the Applicant is entitled to advancement of this application due to the fact that the Applicant is in ill health and as such may be unavailable to aid in the prosecution of the instant Application should the application process run its normal course. Applicant submits the enclosed emergency room documentation in support of this petition.
- (c) the present invention also incorporates technology that is specifically designed to thwart terrorism in the form of child abductions and/or kidnapping and the like, and therefore is also eligible for advanced application examination pursuant to MPEP 708.02(XI).

Applicant need not submit a petition fee as per 37 CFR § 1.102(c), since the rule specifically exempts environmental and energy-related inventions from the petition fee. ("A petition to make an application special may be filed without a fee if the basis for the petition is the applicant's age or health or that the invention will materially enhance the quality of the environment or materially contribute to the development or conservation of energy resources."). Applicant certifies that a prior art search has been performed prior to the filing of this application, with results attached to the patent application submission.

Respectfully submitted,

Kevin Mark Klughart, PhD, PE, JD, MIP, LLM, CCP, MCPS
Bar Member (MA 647771; ME 9044; NH 14212; TX 24025476;
VA 51041; D.Ct. NH; D.Ct. ED/ND.TX, USPTO Reg. No. 39252;
U.S. Tax Ct. #KK0194, U.S. Ct. of Federal Claims)
2516 Lillian Miller Parkway, Suite 115
Denton, TX 76210-7205
tel: (940) 243-9200 / fax: (940) 243-9201

COUNTY OF DENTON

NAME OF CHILD: Vernice Doyle Taliaferro

SEX: Male

DATE OF BIRTH: March 9, 1927

PLACE OF BIRTH: Denton County

FATHER

MOTHER

NAME: Walter Vernice Taliaferro

Violet Lasley

BIRTHPLACE: unknown

unknown

AGE/DOB: unknown

unknown

RACE OR COLOR: White

White

RECORDED IN VOL: 1 PAGE: 57 of the City Records

FILE DATE: March 11, 1927

B32444

This is a true and exact reproduction of the document officially registered and placed on file in the vital records of Denton County, Texas.

ISSUED APR 23 2004

Cynthia Mitchell
Cynthia Mitchell
County Clerk
Denton County, Texas

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ANY ALTERATION OR ERASURE VOIDS THIS CERTIFICATE

Age/Sex: 77 M
Unit #: D000011989
Account#: D00008247478
Admitted: 04/04/04 at 1211

TALIAFERRO, VERNICE DOYLE (ADM IN)

D.1SO-D.129-A
Evans, Stanley
Denton NUR **LIVE**

Page: 2
Printed 04/08/04 at 1026
Period ending 04/08/04 at 1026
DISCHARGE INSTRUCTIONS

DISCHARGE ASSESSMENT/INSTRUCT

04/08/04 1017 CLA

: : : : Prescri. Given To Pt: ☐
: : : : Prescri. Given To Pt: ☐

DISCHARGE ASSESSMENT/INSTRUCT

Date: 04/08/04 Time: 1020 Refer to printed materials for post-discharge instructions: ☐
Diet: ☐ Sent Home with all Bedside Belongings: ☐

=====MEDICATIONS=====

DRUG	DOSE	FREQUENCY	PRECAUT.	
CEFTIN	250 MG	TAKE ONE EVERY 12		Prescri. Given To Pt: <input checked="" type="checkbox"/>
		HOURS FOR 10 DAYS		Prescri. Given To Pt: <input type="checkbox"/>
				Prescri. Given To Pt: <input type="checkbox"/>
				Prescri. Given To Pt: <input type="checkbox"/>
				Prescri. Given To Pt: <input type="checkbox"/>
				Prescri. Given To Pt: <input type="checkbox"/>
				Prescri. Given To Pt: <input type="checkbox"/>
				Prescri. Given To Pt: <input type="checkbox"/>
				Prescri. Given To Pt: <input type="checkbox"/>

FOLLOW UP WITH:

DR. EVAST Evans, Stanley DR. ☐
Comment: ☐ Comment: ☐

: FOLLOW UP WITH DR. EVANS IN ONE WEEK.

: ☐
: ☐
: ☐

=====MEDICATIONS=====

DRUG	DOSE	FREQUENCY	PRECAUT.	
				Prescri. Given To Pt: <input type="checkbox"/>
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				Prescri. Given To Pt: <input type="checkbox"/>

Monogram Initials Name Nurse Type

CLA D.NURCLA ALRUWAILI, CAROL L RN